

**U.S. Department of Justice  
United States Marshals Service**

**PROCESS RECEIPT AND RETURN**

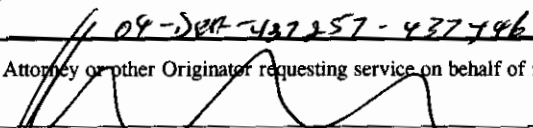
PLAINTIFF <b>UNITED STATES OF AMERICA</b>	COURT CASE NUMBER 817 <b>No. 04-10194-RCL</b>
DEFENDANT <b>ANTHONY BUCCI</b>	TYPE OF PROCESS <b>Preliminary Order of Forfeiture</b>

<b>SERVE AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>James S. Dilday, Esquire</b>
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) <b>Grayer and Dilday, 27 School Street, Suite 400, Boston, MA 02108</b>

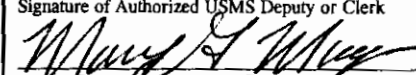
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:  <b>Kristinia E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210</b>	Number of process to be served with this Form - 285  Number of parties to be served in this case  Check for service on U.S.A.	<b>RECEIVED U.S. MARSHAL'S SERVICE BOSTON, MA</b> <b>2006 JAN -8 AM 11:26</b>
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SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please served the attached Preliminary Order of Forfeiture upon the above-referenced individual by certified mail, return receipt requested.

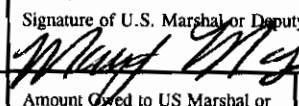
Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER <b>(617) 748-3100</b>	DATE <b>May 30, 2006</b>
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <b>38</b>	District to Serve No. <b>38</b>	Signature of Authorized USMS Deputy or Clerk 	Date <b>6/8/06</b>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)				Date of Service <b>12/4/06</b>	Time am pm
				Signature of U.S. Marshal or Deputy 	
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Amount or Refund

REMARKS: **6/8/06 certified: 7002 0510 0004 3542 1134**  
**7/19/06 - NOT RECEIVED AT P.O. - TO PUT IN SEARCH**  
**7/20/06 - RE-SENT CERTIFIED - 7006 0810 0001 5820 4401**  
**12/4/06 - RETURN, UNCLAIMED**

PRIOR EDITIONS MAY  
BE USED

**1. CLERK OF THE COURT**

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD ☐ NOTICE OF SERVICE ☐ BILLING STATEMENT ☐ ACKNOWLEDGMENT OF RECEIPT